

COMMUNITY SERVICE LEARNING LEVEL I PROJECT PLAN

Project Name: _____ **Date:** _____

Location: _____

YO! Coach Name: _____

Phone: _____ **E-mail:** _____

Type of Project: _____
(i.e. tree planting, art mural, peer tutoring)

EDUCATIONAL COMPONENT

How will the project address a need in the community? _____

How will the project provide a rewarding experience for the volunteer? _____

What are the learning objectives? How will they be achieved? _____

How does the service component connect with the learning component? _____

In what ways will youth be involved in the planning and leadership of the project? _____

PROJECT LOGISTICS

Describe project in terms of type of work, number of volunteers, etc: _____

Duration of project (start time – completion): _____

Are other agencies involved? If yes, who and in what capacity? _____

Will the project be open to the overall YO! community? If so, how many participants will this be available to? _____

Will food and or beverages be provided to the volunteers? _____

Will there be a celebration for volunteers upon completion of the project? _____

What materials are needed to complete the project? _____

a. Who will provide? _____

b. If purchase is necessary, estimate cost: _____

What safety issues need to be addressed? _____

ADDITIONAL COMMENTS (attach additional sheets as needed):

Tell me and I forget.
Show me and I remember.
Involve me and I understand.